



COMMITMENT & VALUE CREATION IN ONLINE HEALTH COMMUNITIES: INSIGHTS FROM MEDICINEAFRICA

ABOUT MEDICINEAFRICA

Digital health technologies have opened space for the emergence of a wide range of digital platforms and online communities. These enable the sharing of knowledge and experience and facilitate peer support, both within and across geographical boundaries. Recent studies have shown how these platforms create value for involved parties and the community (Barrett *et al.*, 2016; Goh *et al.*, 2016). MedicineAfrica is a digital platform that facilitates teaching between UK-based medical professionals and students in fragile states such as Somaliland and Palestine. Activities on the site include teaching and mentorship using primarily text-based chat, and also audio and video depending on the strength of the Internet connection.

THE STUDY

We conducted this study with the aim of understanding what motivates clinicians to volunteer their time to teach on the platform. Between 2016 and 2018, we carried out 20 interviews with 17 MedicineAfrica members in different roles, work arrangements (e.g. paid, volunteers) and from different partnerships, geographical locations and functional areas. Through observations of online medical training, we familiarised ourselves with the way the platform works and collaboration is carried out. We collected and analysed a wide range of materials including documents produced by MedicineAfrica, media interviews, briefs, newspaper articles and reports, and also used a short questionnaire to obtain bio-demographical data.

RECOMMENDATIONS

Our findings have practical implications in terms of attracting and motivating volunteers to join MedicineAfrica by identifying the factors that encourage individual clinicians to join in the first place, but also those factors that motivate them to remain actively involved. These factors can be used to attract more volunteers to become members of the online community. In relation to this, there are implications for the governance of MedicineAfrica, its management, as well as founders and site managers of similar digital platforms and online communities; they should aim to create opportunities for members to become active contributors and take new initiatives with leading responsibilities to better support the online communities.

Such opportunities are likely to increase members' commitment and encourage them to show a stronger involvement in online community activities, actively contributing to its sustainability and growth. MedicineAfrica could also make use of the social value it generates for the global health community in order to raise its already high profile, attract more volunteers and develop further partnerships.

FINDINGS

At the time of writing (July 2018), we have identified findings in two distinct strands: members' commitment and value creation. Our study unpacks some of the initial motives that drove members to get involved in the first place, and then reveals a trajectory of their commitment, as this develops over time. Initially, joining MedicineAfrica was seen as a good opportunity to improve one's skillset, give something back to their country, or do something worthwhile:

"I was looking for more opportunities to engage in international public health [...] it seemed to me a worthwhile thing to do. It was interesting, and I could see the benefits of doing that. And I could see also that I could probably deploy my skillset to good effect, really."

Over time, however, we found that members' commitment increased and – with increased commitment – they undertook new roles, often with extended responsibilities, including leadership tasks. These expanded roles were either at a group or programme level, showing not just members' continuing participation in the online community, but also increased responsibility and personal initiative. The quote below, from one of our interviewees, highlights how staying with MedicineAfrica in the long-term empowers them to further contribute to it:

"I'll continue in the role. So, I had hoped to, over the years, help establish more and more, and to support a postgraduate surgical training scheme in [East African country], because once doctors qualify, there's no further training. The postgraduates who want to become surgeons, [they need] more senior surgical training, and also in-country surgical training courses to help support."

These findings show how members' own motivations change as they increase their engagement with the platform. Their initial motivations (e.g. adding a new skillset or work experience to their CV) are superseded by more meaningful reasons, which include – among others – a sense of fulfilment and reciprocity.

Further to the commitment trajectory, our study shows that MedicineAfrica generates at least two different types of value: social and individual. Social value is created in the fragile states where existing healthcare systems are weak, through the improvement of medical practice and subsequently of patient outcomes. This is achieved through training but also through the opportunities the platform provides for online collaborative consultations and knowledge sharing between peers. In a similar vein, participation in the platform was seen as a way of redressing health resource inequalities between countries. By making advanced health knowledge more available, MedicineAfrica allows members to bridge this healthcare education divide. As a research participant explained:

"... knowing that the patients, clinicians and students have such limited access to resources, while we have such an abundance, was a factor... a kind of moral goal in terms of "this is a good thing to do" and a generous and worthwhile thing to do with your educational knowledge."

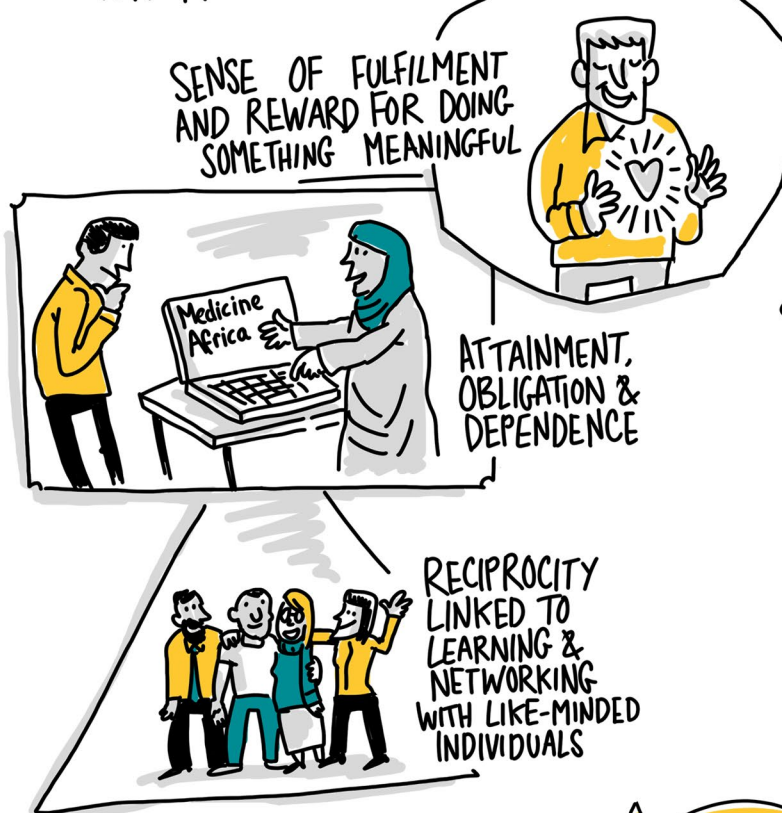
Individual value, on the other hand, is manifested in the cognitive, research-related and professional value generated through clinician participation in the platform. By gaining access to patient cases from different global health settings, UK-based clinicians were able to advance their knowledge on health cases they would not otherwise be able to encounter. This also creates opportunities for data collection, research studies, and publications, for example, in the area of global healthcare, thus generating research value. Finally, the platform provides opportunities for professional value to emerge in the form of leadership development and other skills transferable to the members' full-time jobs. The production of these values constitutes a significant motivation for UK-based clinicians, as illustrated by one clinician's comment:

"Yes, it is a commitment of time, but it's proportionate to what you were able to get out of it, in terms of teaching experience, management experience, leadership, publication and altruistic benefit. You get a lot from a relatively small investment of your time."

INITIAL MOTIVES FOR JOINING MedicineAfrica



DEVELOPING COMMITMENT TOWARDS MedicineAfrica



GROWING COMMITMENT, GROWING ROLES



"And a lot of the students don't get very much surgical training, so I can potentially impact patient outcomes by what I teach them. If patients are going to get better care as the result of what the students are learning, then that's very rewarding"



INDIVIDUAL VALUE



"I would say it's a mutual benefit. And I think most people who are doing these things will say the same; that they feel satisfied to give back, but at the same time, they gain in return this experience of using these resources"

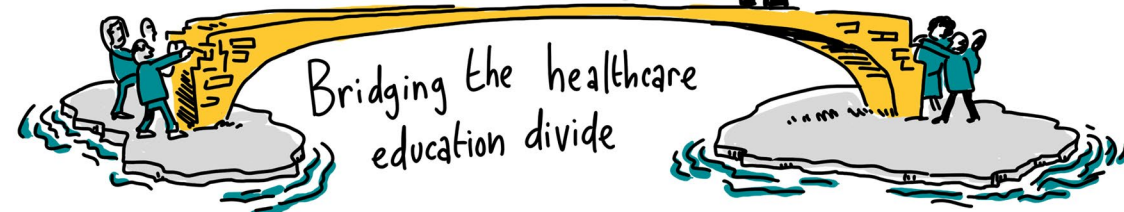


"MedicineAfrica CONNECTS THE GLOBAL HEALTHCARE WORKFORCE ONLINE. WE SUPPORT IMPROVED DELIVERY OF HIGH QUALITY PATIENT CARE, THE BUILDING OF STRONG HEALTHCARE SYSTEMS AND BETTER HEALTH FOR ALL."

SOCIAL VALUE



Health practice Value



CONTACT THE RESEARCH TEAM

For further information about this research project or any other queries, please contact:



Dr Petros Chamakiotis

Lecturer in Information Systems
at the University of Sussex
Business School

E: P.Chamakiotis@sussex.ac.uk
T: @petros_cham



Prof Niki Panteli

Professor of Digital Business
in the School of Management
at Royal Holloway University of
London

E: Niki.Panteli@rhul.ac.uk
T: @niki_panteli



Dr Dimitra Petrakaki

Reader in Information Systems
at the University of Sussex
Business School

E: D.Petrakaki@sussex.ac.uk
T: @DPetrakaki

REFERENCES

Barrett, M. Oborn, E. and Orlikowski, W. (2016). Creating value in online communities: the sociomaterial configuring of strategy, platform, and stakeholder engagement, *Information Systems Research*, 27(4), pp. 704-723.

Goh, J.-M., Gao, G. and Agarwal, R. (2016). The Creation of Social Value: Can an Online Health Community Reduce Rural-Urban Health Disparities? *MIS Quarterly*, 40(1), pp. 247–263.

ACKNOWLEDGEMENTS

We would like to thank all the research participants who enthusiastically made time to speak to us, and Alexandra Pearson who introduced us to MedicineAfrica.